## In Santa Barbara County, Newborns Are the VIPs

Welcome Every Baby program offers visiting services to every parent, regardless of situation.

By Arin Gencer Times Staff Writer

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Nurse Traile Schulman sat wedged between first-time parents on a couch in their Santa Barbara town home. All eyes were on the couple's 4-day-old son, Ryan, who lay wide awake in Schulman's lap, cushioned by a light-blue blanket.

Schulman had already checked his temperature, heartbeat and bowel movements. All normal, she said, as was the small blister on Ryan's mouth — a product of breast-feeding. Now the nurse passed the baby to his mother to observe how she fed him.

The couple, David and Evonne Risdall, described conflicting advice from friends about bottle-feeding.

"We've heard a lot of moms say they think it's a good idea," Evonne Risdall said. "Some had gotten sick for weeks and were glad they could give their babies a bottle during that time. But then we talked to a lot of people [who] think bottles are the worst idea."

It's not unusual for nurses to make home visits after a baby is born, but this meeting was part of a rare program in Santa Barbara County. Welcome Every Baby, or WEB, is one of the few home-visiting services in the state offered to every parent, from Montecito millionaires to Mixtec Indian farmworkers. Other programs usually target their recipients, focusing on teen mothers, for example, or families with children considered at risk for health problems.

The American Academy of Pediatrics has long touted the benefits of home visitation, pointing to other industrialized countries with lower infant-mortality rates, such as England and Denmark, that for decades have offered that service universally as an inherent part of healthcare.

The creators of WEB, started in 2002, say they believe all parents need help, regardless of background, and that every baby should be monitored for healthy development. Specialists can identify problems — such as infections or autism — at an earlier stage. They also can teach parents such things as proper breast-feeding techniques and holding positions.

"Babies don't come with instruction manuals," said Mary Bucher, the program's countywide coordinator. "So it doesn't matter how rich you are or how knowledgeable you are." Some women who have children later in life are as uncertain in their new role as their younger counterparts, Bucher said, while some already familiar with parenthood

need a refresher course.

About 68% of families — with an estimated 4,000 babies — choose to participate when they learn of the program, often through their obstetrician or before they are discharged from the hospital, said Christina Bath, program and evaluation manager for the county's First 5 Commission.

The commission, which funnels tobacco tax dollars into programs for early childhood development and healthcare, contributed \$1 million to the \$1.35-million program for the 2005-06 fiscal year, Bath said. In February, Sojourn Services, the nonprofit that runs Welcome Every Baby, applied to the commission for an additional three years of funding.

Through four home visits and follow-up calls, an infant's development is tracked from birth through 9 months of age. A nurse calls and visits the home within a week of birth to check the baby's and mother's health. A child-development specialist handles the next three meetings and examines the infant's progress at 4 and 9 months.

WEB emerged after more than a year of researching home-visiting services in San Mateo and Sacramento counties, said Kris Pilkington, director of children's programs for Sojourn Services.

Nurses and child-development specialists make about 12,000 home visits every year, Pilkington said, each costing \$116. Home visitors' discussions with parents run the gamut, as do the types of households into which they venture.

"I could be at a mansion and then two hours later in ... one mobile home with two families in it," Schulman said. "I've done home visits in a yard. I've done a home visit where there's servants all over the place."

Indeed, before her recent visit to the Risdalls' home, Schulman had a similar conversation — in Spanish — a little more than a mile away with a couple from Guadalajara, Mexico.

There, the nurse sat on the bottom bunk of a bed, across from a crib in a room at the back of the house, with Eminem rapping from a stereo down the hall.

The couple, Gabriel Garcia and Marla Contreras, said they welcomed any information on feeding their 5-day-old boy, even though they had experience with a daughter, now 3.

Back home, Garcia said, they had only their wits — and their mothers' knowledge — to guide them.

Later, the Risdalls, who had no family nearby, were equally appreciative. They said it helped to have someone who could verify the many things they'd heard at the hospital

and during Evonne's pregnancy.

"People can tell you things and explain things all they want, but until you do it, you don't know what they're talking about," David Risdall said.

"They leave the hospital with so many opinions and advice," Schulman said of parents. The visits are "a great opportunity to make sense of these last few days. And to make sense of it for their family."

Program coordinators say they have already seen signs of success: 79% of WEB mothers still breast-feed at six months, Bath said, compared with 40% statewide, according to a 2003 survey. WEB nurses and development specialists advocate the practice for its numerous health benefits, including antibodies in mothers' milk that help protect against disease.

Referrals to the Tri-Counties Regional Center, which assesses and treats children with developmental disabilities, have increased, Bath said, largely because WEB specialists and parents have recognized delays in motor skills or social development. The commission documented a nearly 68% increase in the number of children under a year old deemed eligible for early-start services between July 2003 and January 2005.

Nurses have warded off health threats. Cassie Hendry recalled finding the temperature of newborn twins she visited last summer too low for comfort: around 95 degrees, instead of the expected 97.6 for infants. It was the lowest she'd ever seen, Hendry said.

When, at Hendry's insistence, the mother took her still-cold boys to the doctor later that day, they were diagnosed with meningitis. "It's just something you wouldn't normally pick up if you don't know about temperature," Hendry said. The babies recovered and are fine.

Though child and family experts applauded WEB's model, they emphasized the importance of targeting certain families beyond the first nine months of infancy. A 1998 American Academy of Pediatrics statement on home visiting suggested that universal programs could dilute scarce resources.

"That universal nine months needs to be a feeder system," said Cathy Jordan, director of the Children, Youth and Family Consortium at the University of Minnesota. Most families might require only a few visits, Jordan said, but others with specialized needs should be followed over a longer period.

"The universality — I think that helps with the stigma that is often associated [with being] ... identified as having a problem," said Alex Morales, a board member of the California Family Resource Assn.

To Pilkington, WEB provides a way to discover unmet community needs. "If we're

worried about a child and a family, they're not falling off a cliff after nine months," she said. "We're going to make sure that they get to where they need to."